

CARD MUST BE TYPED

State of Kansas

CARD MUST BE SIGNED

NOTICE OF INTENTION TO DRILL

(see rules on reverse side)

Expected Spud Date.....03/02/88.....
month day year

API Number 15- 059-24,316-00-00 ¹⁰¹⁶

OPERATOR: License #.....6807.....

NE. SE. SE. Sec 5..... Twp 16.... S, Rg 20..... East
_____ West

NameOil Drillers & Developers.....

Address901 Garfield.....

1020..... Ft. from South Line of Section
per operator request 300-330..... Ft. from East Line of Section

City/State/ZipTopeka, Kansas..... 66606.

(Note: Locate well on Section Plat on reverse side)

Contact Person.....Jack Simpson.....

Nearest lease or unit boundary line330-300..... feet

Phone.....(913) 755-3344.....

County.....Franklin.....

CONTRACTOR: License #417.....3417.....

Lease Name J. Raymond Mock.. Well #.....1...

NameSimpson Drilling.....

Ground surface elevation feet MSL

City/State...Osawatomie, Kansas..... 66064.....

Domestic well within 330 feet: _____yes no

Well Drilled For: Well Class: Type Equipment:

Municipal well within one mile: _____yes no

Oil _____ Storage Infield Mud Rotary

Depth to bottom of fresh water.....

Gas _____ Inj _____ Pool Ext. _____ Air Rotary

Depth to bottom of usable water200.....

_____ OWWO _____ Expl _____ Wildcat _____ Cable

Surface pipe by Alternate: _____ 1 _____ 2

If OWWO: old well info as follows:

Surface pipe planned to be set40.....

Operator

Conductor pipe required

Well Name

Projected Total Depth950..... feet

Comp Date..... Old Total Depth.....

Formation.....Bartlesville.....

I certify that well will comply with K.S.A. 55-101, et seq., plus eventually plugging hole to KCC specifications.

Date 03/02/88..... Signature of Operator or Agent Dea Engelman Title As Agent.....

For KCC Use:

Conductor Pipe Required feet; Minimum Surface Pipe Required20..... feet per Alt. X 2

This Authorization Expires 9-3-88..... Approved By PHH 3-3-88.....

EXPIRES DATE: 3-8-88

